

Declaration For U.S. Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled (INSERT TITLE) DENTAL OR MEDICAL DEVICE

the specification of which

(Check one of
1, 2, or 3.)

1. is attached hereto.
2. was filed on as
International PCT Application Serial No.
and was amended on
(if applicable)
3. XX was filed on November 25, 2003 as
U.S. Application Serial No. 10/720,483
and was amended on November 25, 2003
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose all information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application for which priority is claimed:

(List prior
foreign
applications.)

| | | |
|---------------------------|----------------------------|---|
| <u> </u> (Number) | <u> </u> (Country) | <u> </u> (Day/Month/Year Filed) |
| <u> </u> (Number) | <u> </u> (Country) | <u> </u> (Day/Month/Year Filed) |

Priority Claimed

| | |
|------------|-----------|
| <u>Yes</u> | <u>No</u> |
| <u>Yes</u> | <u>No</u> |

 See attached list for additional prior foreign applications

I hereby claim the benefit under Title 35, United States Code, §120, of any United States application listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

| | | |
|---|--|------------------------------|
| <u>09/972,910</u> (Application Serial No.) | <u>October 10, 2001</u> (Filing Date) | <u>Abandoned</u> (Status) |
| <u> </u> (Application Serial No.) | <u> </u> (Filing Date) | <u> </u> (Status) |

I hereby appoint as principal attorney James C. Lydon, Reg. No. 30,082.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first or sole inventor: Pekka VALLITTU

Inventor's Signature: [Signature] Date: 5/2 2004

Residence: Kylliäisentie 23, FIN-21620 Kuusisto, Finland

Citizenship: Finnish

Post Office Address: same as residence

Full name of second inventor: Lippo LASSILA
Inventor's Signature: *Lippo Lassila* Date: 13.1.2004
Residence: Stålminkatu 5 E 52, FIN-20810 Turku, Finland
Citizenship: Finnish
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Full name of third inventor: Ilkka KANGASNIEMI
Inventor's Signature: *Ilkka Kangasniemi* Date: 13.1.2004
Residence: Köydenpunojankatu 2 B 5, FIN-20100 Turku, Finland
Citizenship: Finnish
Post Office Address: same as residence

Full name of fourth inventor: _____
Inventor's Signature: _____ Date: _____
Residence: _____
Citizenship: _____
Post Office Address: _____

Full name of fifth inventor: _____
Inventor's Signature: _____ Date: _____
Residence: _____
Citizenship: _____
Post Office Address: _____

Full name of sixth inventor: _____
Inventor's Signature: _____ Date: _____
Residence: _____
Citizenship: _____
Post Office Address: _____

Full name of seventh inventor: _____
Inventor's Signature: _____ Date: _____
Residence: _____
Citizenship: _____
Post Office Address: _____

Full name of eighth inventor: _____
Inventor's Signature: _____ Date: _____
Residence: _____
Citizenship: _____
Post Office Address: _____